MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

serial no. 10/575028 APPLICANT(S)

FILING DATE

(FOR USE WITH FORM PTO-875)

CLAIMS

					_	•	LAIMS		_					
	AS FILED IND. DEP.		AFTER		AFTER									
				i"AMENDMENT		NDMENT			AS FILE		AFTER 1"AMENDMENT		AFTE]	
1	шур.	DEP.	IND.	DEP.	IND.	DEP.	j	<u> </u>	ND.	DEP.	IND.		IND.	
2		1	 	 			5			DEI.	1110.	DEF.	TIAD.	1
3		1		 	ļ		5				1	·		╁
4	7.		 	 			5				;	 		+-
5	. 7				 		5			·				\vdash
6						•	5:			 				1
7 8							5′							
9		7					58	-		<u>. </u>				L
10		-, / -					- 59			-				_
11		1					60							
12		7					61							-
13		./					62							
14							63 64							_
15 16	1						65							
17							66							
18		7'			<u>_</u>		67				·			
9 🕳		' /					68							
0'							69	-				`		
2					; -		70 71							·
3					<u>}</u>		$\frac{71}{72}$							
4							73							
5		- 8:		 -			74							
6							75							
7 8	 -					···	7 <u>6</u> 77		-				43	
9							78	-	-					
0		<u> </u> -					79	1-	-					
				 -			80							
							81							
3					 		82 83	-						
							84	 	- -					
				; . 			85	 						
				<u> </u>			86		_					
					—— <u> </u>		87							
							88	 	\bot					
	-						<u>89</u> 90	 						
	-	_					90	 	-		_			
-							92	 	~ -					
	- -						93		_					
							94							
						 	95						 	
-							96							
-	_ _						97							
.,,,,,	-1-	_					98 99		-					_
						_	100			-	_			
15	5 1	,	1				TOTAL		- -	-		_		
10		 		*			IND,] {		1		1	
1	<u> </u>	L	—	. [4		TOTAL		∸ 	. —		<u> </u>		•
120)			3.65		WARE TO	DEP.					! 	(